Filed 09/08/2008

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Form **8879** 

IRS e-file Signature Authorization

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service

▶ Do not send to the IBS: This is not a tax return.

▶ Keep this form for your records. See instructions.

2005

Declaration Control Number (DCN) 00226062010816			
Taxpayer's name RHONDA_R_MANN	Social secu	Social security number  147-78-1209  Spouse's social security number	
Spouse's name	Spouse's s		
Part I Tax Return Information-Tax Year Ending December 31, 2005	Whole Dollars Only	<del></del>	
1 Adjusted gross income (Form 1040, line 38; Form 1040A, line 22; Form 1040EZ, line 4)	vinole Donars Only	16,2	12
2 Total tax (Form 1040, line 63; Form 1040A, line 38; Form 1040EZ, line 10)			60
3 Federal income tax withheld (Form 1040, line 64; Form 1040A, line 39; Form 1040EZ, line 7)			97
4 Refund (Form 1040, line 73a; Form 1040A, line 45a. Form 1040EZ, line 11a)	a caracteria de Nacional Arras	14	3.7.
5 Amount you owe (Form 1040. line 75: Form 1040A, line 47: Form 1040EZ, line 12)			
art II Taxpayer Declaration and Signature Authorization (Be sure you			(rn)
insmitter, or electronic return originator (ERO) to send my return to the IRS and to receive from the I ason for rejection of the transmission. (b) an indication of any refund offset. (c) the reason for any decease of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Age irect debit) entry to the financial institution account indicated in the tax preparation software for paymed a payment of estimated tax, and the financial institution to debit the entry to this account. I furth future Federal tax payments that I direct to be debited through the Electronic Federal Tax Payment syments, I request that the IRS send me a personal identification number (PIN) to access EFTPS. The fect until I notify the U.S. Treasury Financial Agent to terminate the authorization. To revoke a payment at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. ( also a occessing of the electronic payment of taxes to receive confidential information necessary to answer into the payment. I further acknowledge that the personal identification number (PIN) below is my signature for inplicable, my Electronic Funds Withdrawal Consent.  In the payment of the electronic Funds Withdrawal Consent.  I will enter my PIN as my signature on my tax year 2005 electronically filed income tax return.  I will enter my PIN as my signature on my tax year 2005 electronically filed income tax return.	elay in processing the ent to initiate an ACI ment of my Federal the rundersland that I System (EFTPS). It is authorization is the ent, I must contact I enthorize the financi inquiries and resolver my electronic incompany PIN 8120 do not enter a eck this box only if	ne return or refund, and H electronic funds withdra axes owed on this return this authorization may appropriate for me to initiate full force and the U.S. Treasury Financial institutions involved in the issues related to the me tax return and, if  as my signatural zeros	ply uture al the
own PIN <b>and</b> your return is filed using the Pfactitioner PIN method. The ERO must complete Part our signature. Date		02/10/2006	· 
pouse's PIN: check one box only			٠.
Lauthorize to enter my	L DIN	as my signatur	ro
EBO firm name	do not enter a		-
on my tax year 2005 electronically filed income tax return.	do not cinco t	on zeroa	
I will enter my PIN as my signature on my tax year 2005 electronically filed income tax return. Che own PIN and your return is filed using the Practitioner PIN method. The ERO must complete Part couse's signature.	t III below.	you are entering your	•
Practitioner PIN Method Returns Only-con	tinue below		•
art III Certification and Authentication-Practitioner PIN Method Only		<u> </u>	
		606005610	
RO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit PIN.		606205618 enter all zeros	
ertify that the above numeric entry is my PIN, which is my signature for the fax year 2005 electronical dicated above. I confirm that I am submitting this return in accordance with the requirements of the Flandbook for Authorized e-file Providers.	ally filed income tax	return for the taxpayer(s)	
RO's signature  Date	<b>-</b>	02/10/2006	
EDO Hart Date Block		<u>.</u>	
ERO Must Retain This Form - See Instru		:a	
Do Not Submit This Form to the IRS Unless Requer Privacy Act and Paperwork Reduction Act Notice, see the instructions.	esteu 10 DO 3	Form <b>8879</b> (	2005
CA Copyright form software only, 2005 Universal Tax Systems line: All rights reserved US8879S1 Rev. 1		JM 0.	<b>2003</b>